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APPLICANTS

Peter Thir, LaPlata, MD;

\*\* CONTINUING DATA \*\*\*\* None hm

\*\* FOREIGN APPLICATIONS \*\*\*\* None hm

IF REQUIRED, FOREIGN FILING LICENSE GRANTED \*\* SMALL ENTITY \*\*  
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Foreign Priority claimed 35 USC 119 (a-d) conditions met Verified and Acknowledged	<input type="checkbox"/> yes <input checked="" type="checkbox"/> no <input type="checkbox"/> yes <input checked="" type="checkbox"/> no <input type="checkbox"/> Met after <u>Allowance</u> <u>H. Michael Cooper</u> Examiner's Signature Initials	STATE OR COUNTRY MD	SHEETS DRAWING 5	TOTAL CLAIMS 8	INDEPENDENT CLAIMS 6
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ADDRESS

W. Michael Cooper  
 P.O. Box 519  
 Hollywood, MD  
 20636

TITLE

Peripheral vision reflector

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